

02/11/02

10921 U.S. PTO

2-13-02

A  
Docket No.  
7385-83653PATENT APPLICATION TRANSMITTAL LETTER  
(Small Entity)TO THE ASSISTANT COMMISSIONER FOR PATENTS

Transmitted herewith for filing under 35 U.S.C. 111 and 37 C.F.R. 1.53 is the patent application of:

Steven Nelson et al.

For: OPTICAL ATTENUATING UNDERCHIP ENCAPSULANT

10929 U.S. PTO  
10/073462

Enclosed are:

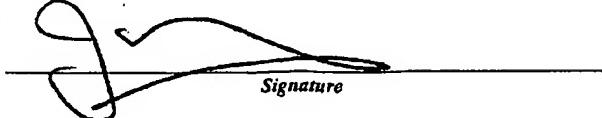
- Certificate of Mailing with Express Mail Mailing Label No. EL854694364US
- 4 sheets of drawings.
- A certified copy of a application.
- Declaration  Signed.  Unsigned.
- Power of Attorney
- Information Disclosure Statement
- Preliminary Amendment
- Verified Statement(s) to Establish Small Entity Status Under 37 C.F.R. 1.9 and 1.27.
- Other: Specification, Claims and Abstract (13 pages)

## CLAIMS AS FILED

For	#Filed	#Allowed	#Extra	Rate	Fee
Total Claims	27	- 20 =	7	x \$9.00	\$63.00
Indep. Claims	4	- 3 =	1	x \$42.00	\$42.00
Multiple Dependent Claims (check if applicable)	<input type="checkbox"/>				\$0.00
				BASIC FEE	\$370.00
				TOTAL FILING FEE	\$475.00

- A check in the amount of \$475.00 to cover the filing fee is enclosed.
- The Commissioner is hereby authorized to charge and credit Deposit Account No. 23-0920 as described below. A duplicate copy of this sheet is enclosed.
- Charge the amount of as filing fee.
- Credit any overpayment.
- Charge any additional filing fees required under 37 C.F.R. 1.16 and 1.17.
- Charge the issue fee set in 37 C.F.R. 1.18 at the mailing of the Notice of Allowance, pursuant to 37 C.F.R. 1.311(b).

Dated: February 11, 2002



Signature

cc:

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# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

\$515.00

## Complete If Known

Application Number	
Filing Date	
First Named Inventor	Steve Nelson
Examiner Name	
Group Art Unit	
Attorney Docket No.	7385-83653

## METHOD OF PAYMENT (check all that apply)

 Check  Credit card  Money Order  Other  None
 Deposit Account:

Deposit Account Number **23-0920**

Deposit Account Name **Welsh & Katz, Ltd.**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.

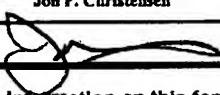
## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
105 740	201 370	Utility filing fee	<b>\$370.00</b>
106 330	206 165	Design filing fee	
107 510	207 255	Plant filing fee	
108 740	208 370	Reissue filing fee	
114 160	214 80	Provisional filing fee	
<b>SUBTOTAL (1)</b>		<b>\$370.00</b>	
<b>2. EXTRA CLAIM FEES FOR UTILITY AND DESIGN PATENTS</b>			
Extra Claims	Fee from below	Fee Paid	
Total Claims <b>27</b> -20** = <b>7</b>	X <b>9.00</b>	= <b>\$63.00</b>	
Independent Claims <b>4</b> -3** = <b>1</b>	X <b>42.00</b>	= <b>\$42.00</b>	
Multiple Dependent			
<b>Large Entity</b>		<b>Small Entity</b>	
Fee Code (\$)	Fee Code (\$)	Fee Description	
103 18	203 9	Claims in excess of 20	
102 84	202 42	Independent claims in excess of 3	
104 280	204 140	Multiple dependent claim, if not paid	
109 84	209 42	" Reissue independent claims over original patent	
110 18	210 9	" Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (2)</b>		<b>\$105.00</b>	
*Reduced by Basic Filing Fee Paid			
<b>SUBTOTAL (3)</b>		<b>\$40.00</b>	

\*\*or number previously paid, if greater; For Reissues, see above

## SUBMITTED BY

Name (Print/Type)	Jon P. Christensen	Registration No. (Attorney/Agent)	34,137	Telephone	312-655-1500
Signature			Date	February 11, 2002	

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## Certificate of Express Mailing

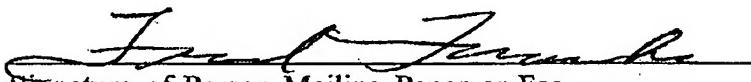
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Date of Deposit: February 11, 2002

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Postal Service "Express Mail" Post Office to Addressee. Service under 37  
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